

Approved in accordance with Case 102-5.

FILE NOTATIONS

Entered in NID File
 Location Map Pinned
 Card Indexed

Checked by Chief
 Approval Letter 2-24-71
 Disapproval Letter

COMPLETION DATA:

Date Well Completed

Location Inspected

W..... WW..... TA.....

Bond released

W..... OS..... PA.....

State or Fee Land

LOGS FILED

Driller's Log.....

Electric Logs (No.)

E..... I..... Dual I Lat..... GR-N..... Micro.....

BHC Sonic GR..... Lat..... Mi-I..... Sonic.....

CBLog..... CCLog..... Others.....

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☒GAS
WELL ☐

OTHER

SINGLE
ZONE ☐MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

UTE PRODUCTION COMPANY OPERATOR No. 1

3. ADDRESS OF OPERATOR

P.O. Box 1743, Grand Junction, Colorado 81501

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface
930' FSL and 800' FSL of sec. 19, T20S, R24E

At proposed prod. zone

same

NR SP 50

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

8 miles northeast of Cisco, Utah

15. DISTANCE FROM PROPOSED*

390'

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

16. NO. OF ACRES IN LEASE

319.58

17. NO. OF ACRES ASSIGNED
TO THIS WELL

10

18. DISTANCE FROM PROPOSED LOCATION*

740'

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

1050' ✓

20. ROTARY OR CABLE TOOLS

Rotary and air

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

4554 Gr

22. APPROX. DATE WORK WILL START*

July 20, 1971

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
8 3/4"	7"	23#	60'	15 sac circ. to surface
6 1/4"	4 1/2"	9.5#	T.D.	25 sac.

WE PROPOSE THE FOLLOWING PROGRAM:

Drill 8 3/4" hole to 60'

Set 2 lengths (30') each, 7" 23# casing, cement with 15 sac.

Drill 6 1/4" hole to T.D.

Test Brushy Basin sand at approximately 1050'

Test Salt Wash sand at approximately 1250' if production is not found
in the Brushy Basin sand.

Set 4 1/2" 9.5# casing through production, if found and cement w/25 sac.

Plug and abandon and set marker if dry hole.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

TITLE

General Partner

DATE

7/15/71

(This space for Federal or State office use)

PERMIT NO.

43-019-30071

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

GRAND COUNTY, UTAH



GRAND JUNCTION, COLO. 7/19/71

July 26, 1971

Ute Production Company
Box 1743
Grand Junction, Colorado 81501

Re: Well No's. Ute Federal #1 & #2
Sec. 19, T. 20 S, R. 24 E,
Grand County, Utah

Gentlemen:

Insofar as this office is concerned, approval to drill the above mentioned well is hereby granted in accordance with the Order issued in Cause No. 102-5.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

PAUL W. BURCHELL--Chief Petroleum Engineer
HOME: 277-2890
OFFICE: 328-5771

This approval terminates within 90 days if the above wells have not been spudded-in within said period.

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered during drilling.

The API numbers assigned to these wells are 43-019-30071 (#1) and 43-019-30072 (#2).

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

CLEON B. FEIGHT
DIRECTOR

CBF:sd
cc: U.S. Geological Survey

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION
Salt Lake City 14, Utah

REPORT OF OPERATIONS AND WELL STATUS REPORT

State Utah County Grand Field or Lease Gravel File

The following is a correct report of operations and production (including drilling and producing wells) for July-Aug & Sept, 1971

Agent's address P.O.Box 1743 Company UTE PRODUCTION CO

Signed [Signature]

Phone 242-5111 (303) Agent's title General Partner

State Lease No. Federal Lease No. U-2177 Indian Lease No. Fee & Pat. ☐

Sec. & ¼ of ¼	Twp.	Range	Well No.	*Status	Oil Bbls.	Water Bbls.	Gas MCF's	REMARKS (If drilling, Depth; if shut down, Cause; Date & Results of Water Shut-Off Test; Contents of Gas; and Gas-Oil Ratio Test)	
								No. of Days Produced	
SWNWSE sec 19	20S	24E	UTE-FED #1	SI	0	0	0	0	Temporary abandon, will be plugged.

Note: There were no runs or sales of oil; no M cu. ft. of gas sold; no runs or sales of gasoline during the month.

NOTE: Report on this form as provided for in Rule C-22. (See back of form.)

*STATUS: F-Flowing P-Pumping GL-Gas Lift
SI-Shut In D-Dead

FORM OGC-8-X
FILE IN QUADRUPLICATE

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL & GAS CONSERVATION
1588 West North Temple
Salt Lake City, Utah 84116

REPORT OF WATER ENCOUNTERED DURING DRILLING

Well Name & Number UTE-FED #1
Operator Ute Prod Co Oper #1 Address Grand Junction, Colo
P.O.B x 1743 Phone 242-5111
Contractor Beeman Bros. Address Moab, Utah Phone _____
Location NW 1/4 SE 1/4 Sec. 19 T. 20S N R. 24E E Grand County, Utah.
S W

Water Sands:

	Depth: From- To-	Volume: Flow Rate or Head-	Quality: Fresh or Salty-
1.	<u>1060 - 1072</u>	<u>Damp sand, no water</u>	<u>no test</u>
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

(Continue on reverse side if necessary)

Formation Tops:

	<u>607</u>	<u>Greenhorn shale</u>
	<u>713</u>	<u>Dakota sand</u>
	<u>875</u>	<u>Buckhorn sand</u>
	<u>1060</u>	<u>Brushy Basin sand congl.</u>
Remarks:	<u>1128</u>	<u>Salt Wash Sand</u>

No water found in this hole.

- NOTE:
- (a) Upon diminishing supply of forms, please inform this office.
 - (b) Report on this form as provided for in Rule C-20, General Rules and Regulations and Rules of Practice and Procedure, (See back of this form)
 - (c) If a water analysis has been made of the above reported zone, please forward a copy along with this form.

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Dry Hole		5. LEASE DESIGNATION AND SERIAL NO. U-2177
2. NAME OF OPERATOR Ute Production Co Operator #1		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O.Box 1743, Grand Junction Colo 81501		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 930' FEL and 800' FSL		8. FARM OR LEASE NAME
14. PERMIT NO.		9. WELL NO. UTE-FED#1
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 4554 Ground		10. FIELD AND POOL, OR WILDCAT Gravel Pile
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA sec. 19 T20S R24E
		12. COUNTY OR PARISH Grand
		13. STATE Utah

16. **Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS** (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

We propose the following plugging program:

With drill pipe hung at 1100', pump in 25 sax cement
with drill pipe hung at 800', pump in 25 sax
with drill pipe hung at 60', pump in 15 sax and set marker.

APPROVED BY DIVISION OF
OIL & GAS CONSERVATION

DATE 10-29-71

BY CB Feight

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE General Partner

DATE 10-14-71

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

35' 195-246

1/24/71

Bill Stava -

North of Carter Well

No sand
6 1/8 =

Dakota @ 1174 - light fine grain

30' got wet

↓ met Dnly.

Murran - 1291

↓
SH + S.L. - Non Brachy Pouri

to T.D. 1550

↓
No correlation
to Carter well

Will be logging

1) 20 sh across top Murran
2) 10 sh across top of Dakota.

3) 15 sh base of surface pipe - to
surface - only 60' of core
Mud.

↓
Mud between plug.

CMB

STATE OF UTAH

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

OIL & GAS CONSERVATION COMMISSION

U-2177

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

UTE-FED #1

10. FIELD AND POOL, OR WILDCAT
Gravel Pile

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec 19 T20S R24E

12. COUNTY OR PARISH
Grand13. STATE
Utah

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other **Abandon**

2. NAME OF OPERATOR

Ute Production Co Operator #1

3. ADDRESS OF OPERATOR

P.O. Box 1743, Grand Junction Colo 81501

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface **XXXXXXXXXX** 930' FEL & 800' FSLAt top prod. interval reported below **same**At total depth **same**

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

7-29-71

16. DATE T.D. REACHED

8-3-71

17. DATE COMPL. (Ready to prod.)

dry hole

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4554 Gr

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

1247

21. PLUG BACK T.D., MD & TVD

--

22. IF MULTIPLE COMPL., HOW MANY*

--

23. INTERVALS DRILLED BY

ROTARY TOOLS

all

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

none

25. WAS DIRECTIONAL SURVEY MADE

no

26. TYPE ELECTRIC AND OTHER LOGS RUN

Induction-Electric Log

27. WAS WELL CORED

no

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	23#	60'	8 3/4	15 sax	none

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
none							

31. PERFORATION RECORD (Interval, size and number)

none

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
none	none

33.* PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
none		dry hole ✓					
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
			→				
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
		→					

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

General Partner

DATE

10-14-71

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES				38. GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH TOP TRUE VERT. DEPTH
Manco Manco shale	0	607	shale		
Greenhorn shale	607	670	silty shale		
Manco shale	670	713	shale		
Dakota sand	713	777	silty sand		
Morrison shale	777	1060	Variegated shale, blue, green, red		
Brushy Basin Congl.	1060	1107	Course, tight congl. with shale stringers		
green Shale	1107	1123 1177	Variegated shale, with thin, tight sand stringers		
Salt Wash Sand	1123 1177	1249	Hard, tight sand, no odor nor color		

OCT 18 1971

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN PLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

U-2177

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1.

OIL ☐ WELL GAS ☐ WELL OTHER ☐

Dry Hole

2. NAME OF OPERATOR

Ute Production Company Operator No. 1

3. ADDRESS OF OPERATOR

P.O. Box 1743, Grand Junction, Colorado 81501

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)
At surface

930' FBL and 800' FBL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

Ute-Pad #1

10. FIELD AND POOL, OR WILDCAT

Grand 1 file

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

sec 19 T20S R24E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4554 Ground

12. COUNTY OR PARISH

Grand

13. STATE

Utah

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☒

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

The following procedure was followed;

lung to drill pipe at 1100' and pumped in 25 sack cement.

raised to pipe to 800' and pumped in 25 sack cement.

raised to pipe to 60' and pumped in 15 sack and set a marker
and cleaned the location.

18. I hereby certify that the foregoing is true and correct

SIGNED

[Signature]

TITLE

General partner

DATE

11-11-71

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: